



OPERATIONAL MEMO

TITLE:	MEQIP DISCONTINUANCE
SUPERSEDES NUMBER:	N/A
EFFECTIVE DATE:	DECEMBER 27, 2019
DIVISION AND OFFICE:	MEDICAID OPERATIONS OFFICE
PROGRAM AREA:	PERFORMANCE IMPROVEMENT
KEY WORDS:	MEQIP

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Purpose and Audience:

The purpose of this Operational Memo is to inform eligibility sites of the discontinuance of the Medicaid Eligibility Quality Improvement Plan (MEQIP).

Information:

The Department's focus on county oversight and accountability has required restructuring within the Department and repurposing of resources. MEQIP will be repurposed to support the Department's goals.

While the MEQIP reporting requirement has been discontinued, eligibility sites should continue as a best practice to monitor case accuracy including timely and accurate disenrollment as described in Agency Letter 18 – 002.

FAQs:

1. Does our county still need to review Medical Assistance cases?

Yes, all Eligibility Sites are responsible for ensuring accurate eligibility determinations are being made by reviewing Medical Assistance cases.

2. Do I need to report my error findings to the Department?

No, you do not need to report error findings.

3. I did not submit some MEQIP reports prior to this Memo, do I need to submit them?

If you received an extension that passed this memo date, you do not need to submit.

4. Do I still need to review the Timely Disenrollment Report?

Yes, you still need to review the report. Eligibility sites are still responsible for disenrolling members timely and accurately.

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